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Date: MARCH 6, 2006

Attorney Docket No.: 02849/000G277-US0

## **FAX TRANSMISSION COVER SHEET**

**Phone Number Transmitting To: (571) 273-8300**

**TO: UNITED STATES PATENT AND TRADEMARK OFFICE**

Examiner: A. ROBINSON-BOYCE

Group Art: 3639

**Paper(s) Being Transmitted:** AMENDMENT RESPONSIVE TO OFFICE ACTION  
OF DECEMBER 6, 2005 (6 pages);  
TRANSMITTAL FORM (1 page); and  
AMENDMENT TRANSMITTAL LETTER(1 page)

Number of Pages Being Transmitted (including cover): 9

**CERTIFICATION OF FACSIMILE TRANSMISSION UNDER 37 CFR 1.8**

Serial No.: 09/454,770

**Filed: DECEMBER 3, 1999**

I hereby certify that the above papers are being facsimile transmitted to the United States Patent and Trademark Office on the date shown below.

**Name: Nancy Joyce Simmons**

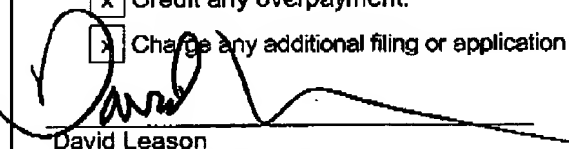
**Date: MARCH 6, 2006**

Signature

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AMENDMENT TRANSMITTAL LETTER				Docket No. 02849/000G277-USO	
Application No. 09/454,770-Conf. #4218		Filing Date December 3, 1999		Examiner A. Robinson-Boyce	
				Art Unit 3639	
Applicant(s): Clifford C. Thompson					
Invention: RESIDENTIAL AND BUSINESS LOGISTICS SYSTEM & METHOD					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	11	- 39 =		X	
Independent Claims	1	- 4 =		X	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____ A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-0100</u> as described below.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17					
 David Leason Attorney/Agent Reg. No.: 36,195  DARBY & DARBY P.C. P.O. Box 5257 New York, New York 10150-5257 (212) 527-7700				Dated: <u>March 6, 2006</u>	

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Docket No.: 02849/000G277-US0  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Clifford C. Thompson

Application No.: 09/454,770

Confirmation No.: 4218

Filed: December 3, 1999

Art Unit: 3639

For: RESIDENTIAL AND BUSINESS LOGISTICS  
SYSTEM & METHOD

Examiner: A. Robinson-Boyce

**AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**INTRODUCTORY COMMENTS**

In response to the Office Action dated December 6, 2005, please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 4 of this paper.

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